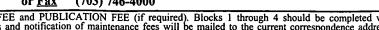
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>



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04/06/2004

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(Depositor's name (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/057,887	01/29/2002	Sekiji Nishino	826.1788	2402	

TITLE OF INVENTION: METHOD AND DEVICE GENERATING DATA INPUT TO AN ELECTROMAGNETIC FIELD INTENSITY CALCULATING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330	\$300	\$1630	07/06/2004	
EXAMINER		ART UNIT	CLASS-SUBCLASS]	•	
LE, JOHN H		2863	702-065000	_		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Numb₂r is required.			For printing on the patent front page: nes of up to 3 registered patent a ents OR, alternatively, (2) the name in (having as a member a registered ent) and the names of up to 2 registereds or agents. If no name is listed to be printed.	attorneys or of a single attorney or tered patent	& HALSEY LLP	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

FUJITSU LIMITED

(B) RESIDENCE: (CITY and STATE OR COUNTRY) Kawasaki, JAPAN

rlease check the appropriate assignee category or categor	ories (will not be printed on the patent);	☐ individual	Corporation or other private group entity	government
la. The following fee(s) are enclosed:	4b. Payment of Fee(s):			
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K Publication Fee	☐ Payment by credit of	ard. Form PTO-	2038 is attached.	
☐ Advance Order - # of Copies	The Director is her Deposit Account Num	reby authorized	by charge the required fee(s), or credit any (enclose an extra copy of this	overpayment, to form).

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(Authorized Signature) (Authorized Signature) (Date) 6/4/04	
(Authorized Signature) Court Q. Selling ex (Date) 6/4/04 RICHARD A. GOLLHOFER, Reg. No. 31,106	
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06/07/2004 WABRHAM2 00000060 10057887

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